

LAW ENFORCEMENT AGENCY (LEA)**AIRCRAFT REQUEST**

DODAAC: _____ AGENCY NAME: _____

AIRCRAFT POC: _____

ADDRESS (No P.O. Box): _____

CITY: _____ STATE: _____

ZIP: _____ EMAIL: _____

PHONE: _____ FAX: _____

TYPE OF AIRCRAFT AND QUANTITY OF EACH TYPE					
ROTARY	OH-58	OH-6	UH1H	UH1L	UH1N
Flyable Quantity					
Non-Flyable Quantity					
FIXED	C12	C172	C182		
Flyable Quantity					
Non-Flyable Quantity					
OTHER (State type)					
Quantity					
If something other than the marked/stated above aircraft become available, would you like to be offered it?				Yes	No

*****NOTE: The Aircraft justification memorandum and copies of pilots license (s) must accompany this request.**

By signing this document, the Chief Law Enforcement Official or Head of Local Federal Agency (Supervisor/Regional Agent in Charge/ Special Agent in Charge (RAC/SAC)), certifies that the requesting agency listed above has the appropriate funds, license (s), safety and operational training required to operate and maintain the requested aircraft. This agency certifies that all information contained above is accurate and the request for aircraft (s) is warranted and has been approved.

CHIEF LAW ENFORCEMENT OFFICIAL
OR HEAD OF LOCAL FEDERAL
AGENCY (SUPERVISOR/RAC/SAC):_____
PRINTED NAME_____
DATE:_____
SIGNATURE**STATE OR FEDERAL COORDINATOR USE ONLY**

STATE OR FEDERAL COORDINATOR:

PRINTED NAME_____
DATE:_____
SIGNATURE**LESO USE ONLY**

LESO OFFICIALS:

AIRCRAFT SPECIALIST (SIGNATURE)_____
DATE:_____
LESO PROGRAM MANAGER (SIGNATURE)_____
DATE:_____
CUSTOMER MGT DIVISION CHIEF (SIGNATURE)_____
DATE:

LESO NOTES:

DATE ADDED TO NATIONAL WAITING LIST: _____ # OF OFFICERS: _____ # OF AIRCRAFT: _____

ALL REQUIRED DOCUMENTS RECEIVED: REQUEST FORM: _____ JUSTIFICATION LETTER: _____ PILOTS LICENSE (s): _____

COMPLIANCE LIAISON USE ONLY: (DOJ REVIEW) LEA IS NOT SUSPENDED: _____ INITIALS & DATE VERIFIED: _____

AIRCRAFT ALLOCATION (TYPE & SERIAL #): _____